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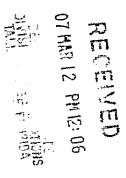
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## LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Walk in Certified Copy Photocopy ■ Mail out ☐ Will wait Certificate of **NEW/FILINGS AMENDMENTS** Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal S Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other Examiner's Initials

CR2E031(7/97)

#### ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I - NAME

The name of the corporation shall be:

Ilusion Nursery Inc

#### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

Place of business: 15075 SW 179, Ave Minn; F). 33196 Mailing: 151855W 179 AW Miami, Fl. 33196

### ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 shares

# 

The name and address of the initial registered agent is:

Loxell Bergolla 15185 SW 179 AUP Miami Florida 33196

#### ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

LORFILL BERGOILA 15185 SW 179 AVE Miami, Fl. 33196

The undersigned incorporator has executed these Articles of Incorporation this 8 day of MARCH 2007

ARTICLE VI DIRECTOR(S)

TALL ARTICLE VI DIREC Lorell Bergolla - President 15185 SW 179 AUP Mramy Florida 33196

<u>CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE</u> Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent/Signature